



## B.R.I.D.G.E. ALLIANCE PHOTO RELEASE FORM

B.R.I.D.G.E. Alliance  
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Middletown, DE  
19709

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I understand and agree that all photos will become the property of the B.R.I.D.G.E. Alliance and will not be returned.

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**I HAVE READ AND UNDERSTAND THE ABOVE PHOTO RELEASE. I AFFIRM THAT I AM AT LEAST 18 YEARS OF AGE, OR, IF I AM UNDER 18 YEARS OF AGE, I HAVE OBTAINED THE REQUIRED CONSENT OF MY PARENTS/GUARDIANS AS EVIDENCED BY THEIR SIGNATURES BELOW I ACCEPT:**

Print Name: \_\_\_\_\_

Signature: \_\_\_\_\_ | Date: \_\_ / \_\_ / \_\_\_\_

**If under 18, parent/guardian must sign.**

Parent Signature: \_\_\_\_\_ | Date: \_\_ / \_\_ / \_\_\_\_

Parent Signature: \_\_\_\_\_ | Date: \_\_ / \_\_ / \_\_\_\_